PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10657887

									4 60													
		CLAIMS AS	S FILED - (Column		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN											
TOTAL CLAIMS			18				Г	RATE	FEE		RATE	FEE										
FOR			NUMBER FILED		NUMBER EXTRA		ВА	ASIC FEE	375.00	OR	BASIC FEE	750.00										
TOTAL CHARGEABLE CLAIMS			minus 20=		* 9			X\$ 9=		OR	X\$18=											
INDEPENDENT CLAIMS			1 minus 3 =		* 9		T	X42=		OR	X84=											
MULTIPLE DEPENDENT CLAIM P							上			1 1												
* If the difference in column 1 is less than zero, enter "0" in					"O" in a	olumn 2	<u></u>	+140=		OR	+280=											
							1	TOTAL	375	OR	TOTAL											
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						(Column 3)	S	SMALL E	ENTITY	OR	OTHER SMALL											
		CLAIMS		HIGH		100iditiii 0)			ADDI-			ADDI-										
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE										
NDW	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=											
ME	Independent	*	Minus	***		=	T	X42=		OR	X84=											
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM			+140=		OR	+280=											
								TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE											
		(Column 3)																				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE										
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=											
	Independent	*	Minus	***		=		X42=		OR	X84=											
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										+280=											
	·						L	+140= TOTAL		OR	+280= TOTAL											
								DOIT. FEE	L	OR	ADDIT. FEE	<u></u>										
(Column 1) (Column 2) (Column 3)																						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE										
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=											
	Independent	*	Minus	***		=		X42=		1	X84=	1										
	FIRST PRESE	ENTATION OF M	IULTIPLE DE	PENDEN	T CLAIN		1			OR		 										
	If the	d t- t	the	luca - 0	- #O" '	alum- C	L	+140=		OR	+280=											
**		ımber Previously F	Paid For" IN Th	HIS SPACE	is less tha	an 20, enter "20."	" AD	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE											
							er found	dinth ap	propriate bo	x in co	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											